

**Specialty Surgery Center**  
**Account Inquiry**

11/06/2013 09:06AM

Specialty Surgery Center  
116 BROWN AVE  
CROSSVILLE, TN 38555  
Phone: 931-484-2500

11/06/2013

ITEMIZED STATEMENT

<u>Date</u>	<u>Transaction</u>	<u>Amount</u>	<u>Open Amt.</u>
08/06/12	Charge, Services Pending (DEP00)	.00	.00
08/06/12	Deposit	-53.50	
08/16/12	Deposit Reversal, Funds Applied to Actual Charge	53.50	
08/06/12	Injection Diagnostic Or Therapeutic Agent, Paravertebral Facet (zygapophyseal) Joint (or Nerves Innervating That Joint) W/ Image Guidance Flouroscopy, Cervial Or Thoracic: Single Level (64490)	1,250.00	.00
08/16/12	Insurance Payment	-160.65	
08/16/12	CONTRACTUAL ADJUSTMENT	-1,049.19	
08/16/12	Insurance Transfer	40.16	
08/16/12	Deposit Applied	-40.16	
08/06/12	Injection Diagnostic Or Therapeutic Agent, Paravertebral Facet (zygapophyseal) Joint (or Nerves Innervating That Joint) W/ Image Guidance Flouroscopy, Cervial Or Thoracic: Single Level (64490)	1,250.00	.00
08/16/12	Insurance Payment	-80.32	
08/16/12	CONTRACTUAL ADJUSTMENT	-1,149.60	
08/16/12	Insurance Transfer	20.08	
08/16/12	Deposit Applied	-13.34	
09/06/12	Self Pay Payment	-6.74	
08/06/12	Second Level (list Separately In Addition To Code For Primary Procedure) (64491)	1,250.00	.00
08/16/12	Insurance Payment	-28.07	
08/16/12	CONTRACTUAL ADJUSTMENT	-1,214.91	
08/16/12	Insurance Transfer	7.02	
09/06/12	Self Pay Payment	-7.02	
08/06/12	Second Level (list Separately In Addition To Code For Primary Procedure) (64491)	1,250.00	.00
08/16/12	Insurance Payment	-28.07	
08/16/12	CONTRACTUAL ADJUSTMENT	-1,214.91	

08/16/12	Insurance Transfer	7.02	
09/06/12	Self Pay Payment	-7.02	
08/06/12	Third And Any Additional Level (64492)	1,250.00	.00
08/16/12	Insurance Payment	-28.07	
08/16/12	CONTRACTUAL ADJUSTMENT	-1,214.91	
08/16/12	Insurance Transfer	7.02	
09/06/12	Self Pay Payment	-7.02	
08/06/12	Third And Any Additional Level (64492)	1,250.00	.00
08/16/12	Insurance Payment	-28.07	
08/16/12	CONTRACTUAL ADJUSTMENT	-1,214.91	
08/16/12	Insurance Transfer	7.02	
09/06/12	Self Pay Payment	-7.02	
<hr/>		<hr/>	
09/26/12	Injection Diagnostic Or Therapeutic Agent, Paravertebral Facet (zygapophyseal) Joint (or Nerves Innervating That Joint) W/ Image Guidance Flouroscopy, Cervial Or Thoracic: Single Level (64490)	1,250.00	.00
10/04/12	Insurance Payment	-160.65	
10/04/12	CONTRACTUAL ADJUSTMENT	-1,049.19	

# Account Information Report

Include: All

Show: Unexpanded Details

Page: 8  
Date: 06/17/2013  
Time: 12:49:26 PM

Posting Date	Service Date	User	Description	Amount	Balance
09/21/2012	09/14/2012	TC	1000F [0.00 x 1] Billable: Standard, Scott C. MD; Rendering: Standard, Scott C. MD Practice Location: BNT Howell Allen Clinic; Service Location: BNT Howell Allen Clinic; Referring: Standard, Scott C. MD [724.4] CoPay: \$0.00; Visit Type: Office Visit; Visit ID: 145496 Tobacco use assessed (CAD, CAP, COPD, PV) (DM) Batch: 8418 Dr. Standard 09-14-2012 99213 [99.00 x 1] Billable: Standard, Scott C. MD; Rendering: Standard, Scott C. MD Practice Location: BNT Howell Allen Clinic; Service Location: BNT Howell Allen Clinic; Referring: Standard, Scott C. MD [724.4] CoPay: \$0.00; Visit Type: Office Visit; Visit ID: 145496; Stmt Recipient: NON-CONSULT, OFFICE, EST PATIENT; LVL 3 Batch: 8418 Dr. Standard 09-14-2012	\$0.00	\$0.00
09/21/2012	09/14/2012	TC		\$99.00	\$13.15
09/20/2012		NM		\$0.00	
09/19/2012		NM		(\$684.88)	
09/19/2012		NM		(\$84.10)	
09/18/2012	09/17/2012	CJH	Batch: 8362 BATCH 1901 64483 [790.00 x 1] Billable: Culclasure, John W. MD; Rendering: Culclasure, John W. MD Practice Location: St Thomas Office; Service Location: St Thomas OP Neurosurgical CTR; Referring: Standard, Scott C. MD [722.83 724.4] CoPay: \$0.00; Visit Type: Procedure; Visit ID: 145971 Injection, anesthetic agent and/or steroid, transforaminal epidu NOTE: Patient included in system generated statement export file on 9/10/2012	\$790.00	\$21.02
09/10/2012	09/07/2012	AU		\$0.00	
09/07/2012		NM		\$0.00	
09/06/2012	08/30/2012	SP	1384 (ERA) Batch: 8243 BATCH 3 NOTE: Printed Demand Statement (9/6/2012) 64483 [790.00 x 1] Billable: Culclasure, John W. MD; Rendering: Culclasure, John W. MD Practice Location: St Thomas Office; Service Location: St Thomas OP Neurosurgical CTR; Referring: Standard, Scott C. MD [722.83 724.4] CoPay: \$0.00; Visit Type: Procedure; Visit ID: 142546	\$790.00	\$21.02
08/30/2012		NM	Injection, anesthetic agent and/or steroid, transforaminal epidu Contractual Adjustment [684.88] Medicare; Insurance Plan ID: 1412 (ERA) Batch: 8142 BATCH 3001	(\$684.88)	
08/30/2012		NM	Insurance Payment [84.10] Medicare; Check, 886373233; Insurance Plan ID: 1412 (ERA) Batch: 8142 BATCH 3001	(\$84.10)	